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Project Title: Disaster Readiness Survey Addressing Special Needs Populations in Dorchester County, MD

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Introduction

Emergency Preparedness Planning is an integral part of most service agencies these days as we strive to make sure, during an emergency, that we operate as efficiently as possible and serve our community to the best of our ability. However, for many public health agencies that deal with emergency preparedness planning, the issue of sheltering people who have special needs is a fundamental and significant concern. It is hypothesized that current emergency response plans do not sufficiently address the specific needs of people who require special assistance.

Special Needs Populations (SNPs) would be one of the primary groups to be negatively impacted if a disaster were to arise and should be included in any emergency plans, as the usual methods of support and assistance will most likely not be sufficient for this group. The major concern of sheltering populations with special needs is that this population is broad, and has a variety of particular needs that will require careful attention in an emergency situation.

Background

The definition of SNPs means different things to different people based on the community in question. This lack of consensus has been a roadblock for many people, organizations, and institutions, unclear of which population is being addressed when using the term "SNPs", and this discrepancy or uncertainty may cause confusion and/or delays in emergency planning and implementation.

In general, SNPs are comprised of individuals that can live sufficiently and function well in the community on a daily basis. These individuals are able to accommodate their needs (i.e. minor mobility issues, general medication needs, chronic but stable health care problems, etc.) as long as they are within their own environment including familiar surroundings. Once removed from that environment, extra assistance will be required to ensure the safety and wellbeing of these individuals. Many people with special needs are able to adapt to a general population shelter with minor adjustments, provided the requirements have been identified and planned for ahead of time.

For this project, we chose to look at Dorchester County, Maryland. Although rather large in overall land-mass, Dorchester is primarily a rural area and relatively impoverished (Median Household Income Average: National-\$51k, Maryland-\$66k, Dorchester \$42k). Therefore, our project team felt there potentially were not as many resources available in Dorchester County as with the New Jersey team members' communities - thus presenting a more challenging environment. We learned that due to its low density population, this county had no intention of opening a separate emergency shelter for SNPs, lending us to question if SNPs were being included in the planning process at all. Based on the demographics of Dorchester County, we narrowed our SNPs target group to those individuals who are homebound, and developed a survey for key players in the county to assess readiness to shelter this select population in a general shelter in the event of an emengency.

Method & Procedure

Due to the wide geographic locations of our team, all discussions were held via monthly conference calls, each call lasting approximately one hour in length. Conference calling was made available through the generosity of the Dorchester County Health Department. In between meetings we would consult each other through electronic mailing.

Our intended purpose of the project was to assess the readiness of a community to shelter homebound persons. The first task of our group was to conduct some preliminary research, mainly utilizing on-line resources to get a better definition of SNP's. We collected data from various county agencies (i.e. human services, county working groups, offices of emergency management, health departments) and used information from the US Census as well. After discussion with all team members we decided to focus on homebound individuals that reside in Dorchester County, Maryland who would require additional assistance in the event of an emergency.

After narrowing our scope of SNPs to homebound individuals we decided that the best way to capture this readiness information was to conduct a survey that would be disseminated to county agencies and organizations that primary deal with this specific special needs populations group. Our next step was to identify specific related/pertinent agencies and organizations within Dorchester County and determine which and how many of them would be surveyed. Upon agreement from all team members, we decided on sending out the survey to the following agencies:

- Dorchester County Emergency Management Office: Wayne Robinson
- Dorchester County Dept. of Social Services: Bill McDonnell
- Office of Aging: Jackie Vickers
- Dorchester County Health Dept.: Cheryl MacLaughlin
- Medical Assistance Transportation Program: Robin Twilley
- Developmental Disabilities Admin.: Robin Ruf
- North Dorchester Senior Center: Mary Thorpe (Delmarva Community Services)

Our team drafted a series of questions utilizing an array of on-line resources, such as the American Red Cross Website and various state and local agencies across the country. We initially decided on the development of a one-page survey questionnaire, and later decided on adding a cover letter which would be enclosed along with the written survey. In early August, 2008, prior to dissemination of the survey, we sent an introduction letter to all the agencies listed above. Then in mid-August, the introduction letter was followed-up by the actual survey.

Our anticipated outcome from this project was to be able to determine if current emergency plans for homebound individuals were adequate, and, if not, make recommendations to Dorchester County, Maryland on how to better prepare their clients in the event of a sudden public health emergency.

Results

The survey tool was disseminated to the seven organizations (listed above). Out of these seven, six responded by either faxing or mailing in their surveys to the Dorchester County Health Department. Therefore, based upon the information we received, our overall response rate was **86%**. The agencies who responded are the following:

- Dorchester County Department of Social Services
- Office of Aging (Pleasant Day)
- Dorchester County Health Department
- Medical Assistance Transportation Program
- Developmental Disabilities Administration
- North Dorchester Senior Center (Delmarva Community Services)

One of the agencies listed above did respond to the survey but they did not think that the survey was applicable towards the population they serve. (On the results spreadsheet, you will see that they responded to the entire survey as N/A). For a complete breakdown of all survey results please see "Survey Results" Spreadsheet (in appendix). Highlights are listed below:

- 1. Total numbers clients identified as being in care of the agency listed above/ agency caseload: 113 (of the five agencies that responded, one did not provide their number of clients served)
- 2. Special Needs Identified by Responding Agencies:

Mobile impairment	5
Developmental Disability	4
Visual impairment	5
Hearing impairment	5
Cognitive impairment	5
Mental health condition	5
Non-English Speaking	3
Other (Agencies had space to list other needs)	2 (no responses)

- 3. Knowledge of facilities within Dorchester County that are currently designated to host or be utilized as a shelter:
 - Pleasant Day Medical Adult Day Care Center
 - Cambridge South Dorchester High School (identified by more than one agency)
 - North Dorchester Middle School (identified by more than one agency)
 - Hurlock Elementary School
 - Cambridge Public Safety Building
 - Dorchester General Hospital
 - Mallard Bay Nursing Home
 - Chesapeake Woods Center
 - Varied: Depending on Affected Area
 - Others: As Determined by Emergency Management Agency
- 4. Types of assistance that can be provided by agency themselves:

- Frozen Meals
- Transportation
- Updated lists of individuals with address for Emergency Management Services (EMS)
- Supervisory Approved Transportation via state-owned vehicles
- Case Management
- 5. Case Management of Homebound Clients in the event of an evacuation need from their residence:
 - Agency would transport clients to designated emergency shelters
 - EMS would notify agency if assistance is needed. Agency would maintain coordination especially on return home
 - Supervisory Discretion, work with shelter registration or management of facility that requires assistance.
- 6. If your agency was contact by an emergency management agency, how time would be needed to collect data of clients/patients that your agency is in charge of (with special needs):
 - Three agencies reported that they could have their data ready in less than three hours (60%)
 - The remaining two agencies reported that they could have their data ready in three to twelve hours (40%)
- 7. One agency (20%) reported that they have a written Memorandum of Understanding (MOU) or Memorandum of Agreement (MOA) in place, with the Dorchester County Emergency Management Board to assist with their clients in the event of an emergency.
 - One agency reported that verbal understanding exists, however no partnering agency/organization was provided.
- 8. If a person with special needs were to appear at a general shelter, what mechanism (if any) will be available to triage and transport this person to a more appropriate shelter, better suited to their needs (this question was specifically targeted for Dorchester County Department of Social Services, DCDSS):
 - DCDSS reported that if available, fire and rescue would assist with triage and transport, but otherwise, they would rely upon volunteers for assistance.
- 9. Overall, one agency (20%) reported that they felt strongly prepared to address the needs of those within their care. However it was reported that the clients themselves would be responsible for providing their own equipment. If the clients do not have their own supplies/support, the agency would seek assistance from nearby hospital or nursing home as needed.
 - Three other agencies (60%) reported that they felt adequately prepared to address the needs of their clients. One of these agencies reported that by utilizing other transportation systems, they would be able to handle the needs of their clients.

Summary

In specific reference to the population of Dorchester County, MD, the availability of transport services/ facilities during an emergency is crucial and provisions of services need to be made, prior to the onset of an emergency. Ideally, having transport on "stand-by" would be the best solution, however cost and time issues must be considered. For example, buses may not be available, or equipped to handle populations with special needs. Or if they are available, they may already have contracted with other agencies prior to us reaching out to them.

Conclusion

In conclusion, we found Dorchester County overall to be fairly well prepared to cope with the special needs of homebound individuals- generally speaking. Of the agencies identified in our project, there was a broad understanding of which facilities within Dorchester County are designated to host or be utilized as a shelter. The agencies also identified what types of assistance that they could provide in an emergency as needed. If contacted by an emergency management agency- most agencies were prepared to provide pertinent data regarding their special needs clients in a relatively short period of time. Additionally, the local Department of Social Services reported that if available, fire and rescue would assist with triage and transport, but otherwise, they would rely upon volunteers for assistance.

By developing partnerships with community entities prior to the onset of an emergency or disaster, a trust and familiarity factor becomes established. Although the Dorchester County Health Department had already established these critical relationships, the advent of this project hopefully served to reinforce and strengthen these pre-existing relationships.

Another goal of this project was to promote the increased visibility of the Dorchester County Health Department to surrounding community entities, including social service organizations, non-profit agencies, and other partners dealing with special needs populations. Reaching out to these community members increased awareness of the Health Department's active role in coordinating sheltering efforts for special needs populations.

We envision this project to be a contribution of the health department's role which would be valued by participating agencies. Collaboration of various agencies and organizations increase likelihood of finding solutions that work for the greater common good. In dealing with a broad-defined population such as those with "special needs", thinking outside-the-box can often times bring about the best solutions (which may prove to be cost-effective as well).

Recommendations

According to the survey results only one agency reported that they had a written MOU in place with their Office of Emergency Management. One major recommendation we can suggest, based on the results, is that all agencies that deal with special needs clients have written Memorandum of Understandings (MOU) or Memorandum of Agreements (MOA) in place. Another recommendation would be to utilize the Dorchester County survey project as a template to be offered for other rural counties to assess their readiness. The survey could assist other agencies, counties, or entities planning for special populations.

Bibliography

- American Red Cross. Power Point Presentation. Special Needs Populations: The Unique Needs of Special Populations in Times of Disaster. Retrieved from www.redcross.org on April 10, 2008.
- BNET: Business Network. An operational definition of the homebound. (1992). Retrieved from http://findarticles.com/p/articles/mi m4149/is /ai 12072379 on April 20, 2008.
- Goeller, Deborah. (November 9, 2004). Worcester County Disaster Sheltering Plan For The Medically Fragile Population. Worcester County Health Department.
- Gottlich. Vicki. Staff Attorney: National Senior Citizens Law Center. <u>Long Awaited</u> <u>Homebound Study Issued - Secretary Recommends Keeping Current Standard</u>
- Grande, Santo. (2005). Impact: Creating Rural Transportation in Maryland: Delmarva Community Services. University of Minnesota: College of Education. Retrieved from http://ici.umn.edu/products/impact/183/prof1.html on April 15, 2008.
- Gregg H. Gilbert, et. al. An Operational Definition of The Homebound. Health Services Research, Feb, 1992
- Northwest Public Health: Discussing public health issues and initiatives in the Pacific Northwest.

 Northwest Center for Public Health Practice. University of Washington School of Public Health and Community Medicine.
- Ocean Side Home Health Services. Homebound definition For Physicians. Retrieved from http://www.oshhs.com/Weblinks/Benefit-Overview.htm on April 11, 2008.
- School of Public Health: University at Albany, State University of New York: Center for Public Health Preparedness; Animals & Emergencies.
- US Census. American Factfinder. Retrieved from www.census.gov on April 18, 2008.

Appendix A:

Introduction Letter

Dorchester County Department of Health Drug and Alcohol Health Services

310 Gay Street Cambridge MD 21613 e-mail: jwinslow@dhmh.state.md.us

Roger L. Harrell, M.H.A. Health Officer John R. Winslow, MHS, CPP
Program Director

August 5, 2008

Mr. Wayne Robinson Dorchester County Emergency Management Office 829 Fieldcrest Road Cambridge, Maryland 21613

Dear Mr. Robinson,

Annmarie Ruiz, Jennifer Sklow, Sumantha Banerjee and I are attending the Mid-Atlantic Health Leadership Institute where we are required to design and develop a year-end project on a topic of our interest. An area of concern to all of us is sheltering of homebound individuals during an emergency. It is our understanding that Dorchester County currently does <u>not</u> plan to provide a Special Needs (SN) Shelter in the event of an emergency due to its low-density population.

As there are no SN shelters in place, our team has decided to develop a pilot survey to assess the readiness of Dorchester County organizations to shelter individuals who are homebound in the event of an emergency requiring evacuation. This project could determine Dorchester County's readiness to provide general shelter for homebound individuals or open and operate a Special Needs shelter if needed.

We will be officially sending a brief *working* survey in the very near future. We hope that you will support our endeavors and indulge us with a few minutes of your time. If you have any questions, please feel free to contact me at (410) 228-7714 x106.

Sincerely,

John Winslow Dorchester County Health Department

Appendix B: Survey

"Disaster Readiness, Emergency Preparedness" Addressing Special Needs Populations in Dorchester County, MD

Please complete the following survey questionnaire and feel free to provide any questions, comments and/or suggestions on the back of this form.

1.	How many homebound clients do you currently identify as being in your care/part of your agency caseload?		
2.	Which special needs have been identified for your agency? PLEASE CHECK ALL THAT APPLY:		
	□ Mobile Impairment □ Cognitive Impairment □ Developmental Disability □ Mental Health Condition □ Visual Impairment □ Non-English Speaking □ Hearing Impairment □ Other:		
3.	Do you know of facilities within Dorchester County that are currently designated to host, or be utilized as a shelter?		
ı	☐ Yes – If Yes, what facility/facilities:☐ No		
4.	If Yes, do these facilities have the ability to care for the homebound population? Yes No Don't Know If your homebound client goes into a short-term shelter- what assistance can your agency provide getting to or staying		
٦.	at the shelter?		
5.	How will your agency case-manage your homebound clients in the event of need for evacuation from their residence?		
6.	If you were contacted by an emergency management agency, how quickly could you pull together data of clients/patents with special needs?		
	☐ Less than 3 hours ☐ 3-12 hours ☐ 12-24 hours ☐ 24-36 hours ☐ Over 36hours		
7.	Are there Memorandums of Agreements/Understanding (MOA's/ MOU's) in place to assist with the homebound population?		
	☐ Yes ☐ No ☐ Don't Know		
Ī	If so, with which agencies do MOA's/MOU's exist?		
8.	*Note: This question is to be earmarked ONLY to DSS) If a SN person shows up at a General Shelter, what mechanism (if any) will be available to triage and transport this person to a more appropriate shelter as needed		
9.	I believe our agency is adequately equipped to address the needs of homebound clients in the event of needing to evacuate them to a general shelter.		
	☐ Strongly Agree ☐ Disagree ☐ Strongly Disagree ☐ Other		

Appendix C: Survey Cover Letter

Date XXXX

Dear Agency,

As a follow up to the letter you received a few weeks back, enclosed please find the survey to assess the readiness of Dorchester County organizations to shelter individuals who are homebound. September is National Preparedness Month and what better time to examine our readiness for times of emergency. Annmarie Ruiz, Jennifer Sklow, Sumantha Banerjee and I truly appreciate your anticipated participation, not only helping us with our Mid-Atlantic Health Leadership Institute project, but also the residents of Dorchester County.

We kindly request you return the survey to the group no later than August 29, 2008 to my office via fax at (410) 228-8049. If you have any questions, please feel free to contact me at (410) 228-7714 x106.

Sincerely,

John Winslow Dorchester County Health Department

Appendix D: Results

(see attached)